

# MULTNOMAH COUNTY CONTRACT APPROVAL FORM (CAF)

Contract #: 0809077

Pre-approved Contract Boilerplate (with County Attorney signature)  Attached  Not Attached

Amendment #: 2

CLASS I Based on Informal / Intermediate Procurement	CLASS II Based on Formal Procurement	CLASS III Intergovernmental Contract (IGA)
<input type="checkbox"/> Personal Services Contract	<input type="checkbox"/> Personal Services Contract	<input type="checkbox"/> Expenditure Contract
PCRB Contract <input type="checkbox"/> Goods or Services <input type="checkbox"/> Maintenance or Licensing Agreement <input type="checkbox"/> Public Works / Construction Contract <input type="checkbox"/> Architectural & Engineering Contract	PCRB Contract <input type="checkbox"/> Goods or Services <input type="checkbox"/> Maintenance or Licensing Agreement <input type="checkbox"/> Public Works / Construction Contract <input type="checkbox"/> Architectural & Engineering Contract	<input checked="" type="checkbox"/> Revenue Contract <input type="checkbox"/> Grant Contract <input type="checkbox"/> Non-Financial Agreement
<input type="checkbox"/> Revenue Contract <input type="checkbox"/> Grant Contract <input type="checkbox"/> Non-Financial Agreement	<input type="checkbox"/> Revenue Contract <input type="checkbox"/> Grant Contract <input type="checkbox"/> Non-Financial Agreement	<input type="checkbox"/> <b>INTER-DEPARTMENTAL AGREEMENT (IDA)</b>

Department: Sheriff's Office Division/ Program: Enforcement Date: 05/24/10  
 Originator: Chief Deputy Timothy Moore Phone: 503-988-4300 Bldg/Room: 503/350  
 Contact: Brad Lynch Phone: 503-988-4336 Bldg/Room: 503/350

Description of Contract: IGA amendment extending the term and payments for the services and expenses of a Sheriff's Office law enforcement captain.

RENEWAL:  PREVIOUS CONTRACT #(S) \_\_\_\_\_ EEO Exhibit 5 required if amount over \$75k

PROCUREMENT EXEMPTION OR CITATION # 46-0130(1)(f) ISSUE DATE: \_\_\_\_\_ EFFECTIVE DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

CONTRACTOR IS:  MBE  WBE  ESB  QRF State Cert# \_\_\_\_\_ or  Self Cert  Non-Profit  N/A (Check all boxes that apply)

Contractor	<u>Regional Organized Crime and Narcotics Task Force</u>		Remittance address (If different)	_____
Address	<u>PO Box 82209</u>		Payment Schedule / Terms:	_____
City/State	<u>Portland, Oregon</u>		<input type="checkbox"/> Lump Sum \$ _____	<input type="checkbox"/> Due on Receipt
ZIP Code	<u>97282</u>		<input type="checkbox"/> Monthly \$ _____	<input type="checkbox"/> Net 30
Phone	<u>503-234-5300</u>		<input type="checkbox"/> Other \$ _____	<input type="checkbox"/> Other
Contract Effective Date	<u>09/22/08</u>	Term Date	<u>06/30/10</u>	
Amendment Effect Date	<u>07/01/10</u>	New Term Date	<u>06/30/11</u>	
Original Contract Amount	\$ 137,736.00	Original PA/Requirements Amount	\$ _____	
Total Amt of Previous Amendments	\$ 197,973.00	Total Amt of Previous Amendments	\$ _____	
Amount of Amendment	\$ 206,294.00	Amount of Amendment	\$ _____	
Total Amount of Agreement \$	\$ 542,003.00	Total PA/Requirements Amount	\$ _____	

**REQUIRED SIGNATURES:**

Department Manager \_\_\_\_\_ DATE \_\_\_\_\_  
 County Attorney \_\_\_\_\_ DATE \_\_\_\_\_  
 CPCA Manager \_\_\_\_\_ DATE \_\_\_\_\_  
 County Chair \_\_\_\_\_ DATE \_\_\_\_\_  
 Sheriff \_\_\_\_\_ DATE \_\_\_\_\_  
 Contract Administration \_\_\_\_\_ DATE \_\_\_\_\_

COMMENTS:

